



# REGISTRATION OVERRIDE

*This is not an add/drop form.*

**Return completed form to the Registrar's Office in the Moore Academic and Administration Building, room 130.**

**Instructions to Students and Faculty:**

- Check the box next to the applicable override request, complete all information within the block, and obtain the required signature(s)
- All information within the individual permission box must be completed before the request can be processed
- Overrides below do not register a student for a closed course, unless the "Closed Course" box is also checked and signed.
- Overrides below do not register a student for more than 18 credits, unless the "Credit Overload" box is also checked and signed.
- This form must be accompanied by a completed add/drop form.

Printed Student Name: \_\_\_\_\_ ID #: \_\_\_\_\_ Registration Term: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<input type="checkbox"/> <b>CLOSED COURSE:</b> Add this course, above the course maximum seat limit. Course: _____ Section #: _____ Instructor Signature: _____ V.P. for Academic Affairs Signature: _____	<input type="checkbox"/> <b>CREDIT OVERLOAD:</b> Add this course, if seats are available, even though it means you will be registered for more than 18 credits. Course: _____ Section #: _____ Maximum Credit Requested: _____ Advisor Signature: _____ V.P. for Academic Affairs Signature: _____
<input type="checkbox"/> <b>PRE-REQUISITE:</b> Add this course, if seats are available, without the required pre-requisite. Course: _____ Section #: _____ Instructor Signature: _____ Department Chairperson Signature: _____	<input type="checkbox"/> <b>TIME OVERLAP:</b> Add this course, if seats are available, which overlaps with another course for which you are already registered.* Course: _____ Section #: _____ Instructor Signature: _____ Instructor Signature: _____ <small>*Attach a written explanation of how you will make up coursework for the missed time.</small>
<input type="checkbox"/> <b>CO-REQUISITE:</b> Add this course, if seats are available, without the required co-requisite. Course: _____ Section #: _____ Instructor Signature: _____ Department Chairperson Signature: _____	<b>OFFICE USE ONLY</b> Date Processed: _____ Processed By: _____ Revised 2/13